FLORIDA BOARD OF NURSING

4052 Bald Cypress Way, Bin C-10 Tallahassee, FL 32399-3252 (850) 245-4125 Nurse Consultant Ext. 3612 www.doh.state.fl.us/mqa/nursing

New Nursing Assistant Training Program Application



NOTE: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your written communications may therefore be subject to public disclosure, which includes the submission of this application.

Florida Board of Nursing New Nursing Assistant Training Program Application

Directions:

- Review Chapter 464, Part II, Certified Nursing Assistants, Florida Statutes, and rule 64B9-15, Rules of the Board of Nursing, Florida Administrative Code. To view the current laws and rules, please visit the Florida Board of Nursing website, www.doh.state.fl.us/mqa/nursing, go to the CNA Homepage and select the links for statutes and rules on-line.
- 2. Obtain licensure from the Department of Education (DOE), Commission on Independent Education for private schools, per s. 464.201(1) (a) Florida Statutes. Public schools may inform the Department of Education of your new school as a courtesy.
- 3. Please obtain and review the most recent curriculum frameworks through DOE at: http://www.fldoe.org/workforce/dwdframe/heal_cluster_frame12.asp.
- 4. Develop written agreements with clinical facilities.
- 5. Submit the complete application to the Board office at the following address:

Florida Board of Nursing Attn: Education Unit 4052 Bald Cypress Way, Bin C-10 Tallahassee, FL 32399

- 6. The Florida Board of Nursing staff will review the submitted application within 30 days of receipt and provide written notification of any errors or omissions. A decision to either approve or deny the application will be made within 90 days of receipt of a complete application by the Board office, pursuant to s. 120.60, Florida Statutes.
- 7. Please use the content outline on the following pages. Use the headers as shown on the outline, including the rule references. Information must be presented in sequential order on the outline.
- 8. Do not omit any required information and use tables as shown.
- 9. Start each section on a new page with the capital letter corresponding to the section on the outline and number all pages consecutively.
- 10. Do not place the application in a binder; secure the copies of the application with rubber bands, do not attach pages together with staples or paper clips.
- 11. Programs may not admit students prior to Board of Nursing approval. Approval is not retroactive.

Sponsoring Institution				
Official Name				
Address				
City, State, Zip				
Telephone and Fax				
Number of Students per Class				
Number of Classes Admitted Annually				
Campus Location				
Program Coordinator/Director				
Address				
Telephone				
Fax				
Email				
training program in accord	ts intention to establish and conduct a Certified Nursing Assistant dance with the laws governing nursing education in Florida and the ing. We understand that the proposed program must be reviewed by			

rules of the Board of Nursing. We understand that the proposed program must be reviewed by board staff, and approval must be received from the Board of Nursing and the Department of Education prior to enrollment of students.

Signed	
Title	
Date	

Program Application Rule 64B9-15.007, F.A.C.

- A. Information about the Sponsoring Institution Rule 64B9-15.005(1), F.A.C.
 - 1. Governing Board
 - 2. Legal Name
 - 3. Evidence of current academic accreditation, and DOE approval if any;
- B. Training Program Rule 64B9-15.005(1)(a), F.A.C.
 - 1. Purpose
 - 2. Goals
 - 3. Program Objectives/Outcomes
- C. Finance Rule 64B9-15.005(4), F.A.C.
 - 1. Provide evidence of sufficient finances and resources, per Rule 64B9-15.005(4), F.A.C., in order to meet the purpose of the program and the needs of the students, faculty, administration and staff.
- D. Student Rule 64B9-15.005 (1)(d), F.A.C.
 - Include the following written policies and procedures, which must be regularly reviewed and provided to students upon admission to the program;
 - a. Student attendance
 - b. Student grading, including program progression and completion criteria
 - c. Student record maintenance
 - d. Student fees and financial aid
 - e. Student rights and responsibilities
 - f. Student grievance
- E. Faculty Rule 64B9-15.005(2) and (3), F.A.C.
 - List the name, title and qualifications of the program coordinator (Place the Curriculum Vitae in Appendix A) who must meet Rule 64B9-15.005(2), F.A.C.
 - a. The program coordinator shall hold a clear and active professional nursing license in Florida;
 - b. Have two years of professional nursing experience and;
 - c. Have one year of experience in nursing home services, i.e., care of the elderly or chronically ill of any age including supervision of Certified Nursing Assistants.

- 2. List the program instructor positions to be filled prior to admission of first students. (Place the Curriculum Vitae in Appendix B) per Rule 64B9-15.005(3) and (4), F.A.C.
 - a. A program instructor shall hold a clear, active Florida license to practice professional nursing;
 - b. Have at least one year of professional nursing experience, and one of the following;
 - i. Have completed a course in teaching adults; or
 - ii. Have at least one year of experience in teaching adults; or
 - iii. Have at least one year of experience in supervising nursing assistants
- 3. Teaching load Rule 64B9-15.005(4)(c), F.A.C.
 - a. Professional nurse to student clinical ratio
- F. Clinical Agency/Facilities Rule 64B0-15.005, F.A.C.
 - 1. List all clinical facilities that the student will use, on the chart below, in order to provide evidence of clinical experience per Rule 64B9-15.005(4)(e) and (f) and 64B9-15.007(2)(h), F.A.C.
 - 2. Provide information on the availability of clinical facilities per Rule 64B9-15.007(2)(h), F.A.C.
 - 3. Include written agreements for clinical facilities in Appendix C per Rule 64B9-15.005(1)(b), F.A.C. The agreement shall define the rights and responsibilities of the program and the clinical facility.

Name and Location of Clinical Facility	Clinical Services Utilized	Number of Students	Number of Program Faculty
(add additional rows if necessary)			

^{*}Facility must meet standards set forth in Rule 64B9-15.005(1)(c), F.A.C.

- G. Curriculum Rule 64B9-15.007(2)(e), F.A.C.
 - 1. Provide a course outline or syllabi (in Appendix D) that contains at minimum the following items:
 - a. Course objectives/outcomes
 - b. Curriculum content divided into number and sequence of:
 - i. Didactic or classroom hours/lab hours
 - ii. Clinical hours
 - c. Teaching methodology
 - d. Textbooks (must be with in five years)
 - e. Clinical skills checklist (Appendix E)
 - f. Copy of certificate of completion (Appendix F)
 *must include CNA program name and information only, total
 hours for the CNA program and the director's signature
 - g. Tentative calendar or schedule for the program
- H. Physical Facilities Rule 64B9-15.005(4), F.A.C.
 - 1. Provide evidence that the program has sufficient resources, materials, space and supplies to meet the needs of students, faculty, staff and administration involved in the program.
 - 2. Classrooms and skills laboratories shall meet requirements in Chapter 1013, F.S. and Chapter 6-2, F.A.C.